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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS	_	
Case number (if known)	_ Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

# Official Form 101

# **Voluntary Petition for Individuals Filing for Bankruptcy**

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).  Bring your picture identification to your meeting with the trustee.	Charles First name  W. Middle name  Moran  Last name and Suffix (Sr., Jr., II, III)	First name  Middle name  Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or		
	maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-6449	

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Document Case number (if known) Debtor 1 Charles W. Moran

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years		■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.			
	Include trade names and doing business as names	Business name(s)	Business name(s)			
		EINs	EINs			
5.	Where you live		If Debtor 2 lives at a different address:			
		8 Pleasant Street Apt. 1 Oak Park, IL 60302				
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
		Cook County	County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing this district to file for	Check one:	Check one:			
bankruptcy		Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	<ul> <li>Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.</li> </ul>			
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			

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Case number (if known) Case number (if known) Debtor 1 Charles W. Moran

art 2:	Tell the Court About	Your Bank	ruptcy C	ase				
Ва	ne chapter of the ankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.						
ch	noosing to file under	■ Chap	ter 7					
		☐ Chap	ter 11					
		☐ Chap	ter 12					
		☐ Chap	ter 13					
. Но	ow you will pay the fee	abo	out how you	e entire fee when I file my pour may pay. Typically, if your attorney is submitting your address.	are paying the f	ee yourself, you ma	ay pay with cash, cashi	er's check, or money
				y the fee in installments. If ee in Installments (Official Fo		option, sign and a	tach the Application for	r Individuals to Pay
			☐ I request that my fee be waived (You may request this option only if you are filing for Chapter					
		but is not required to, waive your fee, and may do so only if your income is less than 150% of the official applies to your family size and you are unable to pay the fee in installments). If you choose this option,						
				ion to Have the Chapter 7 Fi				
	ave you filed for	■ No.						
	ankruptcy within the st 8 years?	☐ Yes.						
			District		When		Case number	
			District		When		Case number	
			District		When		Case number	
	re any bankruptcy	■ No						
fil no yo pa	ases pending or being ed by a spouse who is of filing this case with ou, or by a business artner, or by an filiate?	☐ Yes.						
			Debtor			F	Relationship to you	
			District		When	(	Case number, if known	
			Debtor			F	Relationship to you	
			District		When	(	Case number, if known	
1. Do	o you rent your	□ No.	Go to	line 12.				
re	sidence?	Yes.	Has y	our landlord obtained an evid	ction judgment a	gainst you?		
		_ 100.		No. Go to line 12.				
			_	Yes. Fill out <i>Initial Stateme</i>	ent Ahout an Evic	ction Judament Age	ainst You (Form 101A) s	and file it with this
			ы	bankruptcy petition.	nn noodt an Evic	aon dadgmont Age		and mo it with tills

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Part	Report About Any Bu	sinesses	You Owr	as a Sole Proprieto	or	
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.		
		☐ Yes.	Name	and location of busing	ness	
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	e of business, if any		
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	per, Street, City, State	e & ZIP Code	
	it to this petition.		Chec	k the appropriate box	to describe your business:	
	☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))			ess (as defined in 11 U.S.C. § 101(27A))		
				Single Asset Real I	Estate (as defined in 11 U.S.C. § 101(51B))	
				Stockbroker (as de	fined in 11 U.S.C. § 101(53A))	
				Commodity Broker	(as defined in 11 U.S.C. § 101(6))	
				None of the above		
13. Are you filing under  Chapter 11 of the  Bankruptcy Code and are you a small business debtor?  If you are filing under Chapter 11, the court must know whether you are a small business deadlines. If you indicate that you are a small business debtor, you must attach your most operations, cash-flow statement, and federal income tax return or if any of these document in 11 U.S.C. 1116(1)(B).		small business debtor, you must attach your most recent balance sheet, statement of deral income tax return or if any of these documents do not exist, follow the procedure				
	For a definition of small	■ No.	I am r	not filing under Chapt	er 11.	
	business debtor, see 11 U.S.C. § 101(51D).	□ No.		I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.		
		☐ Yes.	I am f	iling under Chapter 1	1 and I am a small business debtor according to the definition in the Bankruptcy Code.	
Part	4: Report if You Own or	Have Any	, Hazardo	ous Property or Any	Property That Needs Immediate Attention	
	Do you own or have any			,		
1-7.	property that poses or is alleged to pose a threat of imminent and identifiable hazard to	■ No. □ Yes.	What is	the hazard?		
	public health or safety? Or do you own any property that needs immediate attention?			diate attention is why is it needed?		
For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?			Where is	s the property?		
					Number, Street, City, State & Zip Code	

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Debtor 1 Charles W. Moran

Document Case number (if known)

15. Tell the court whether you have received a briefing about credit

counseling.

Part 5:

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### About Debtor 1:

You must check one:

Explain Your Efforts to Receive a Briefing About Credit Counseling

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

#### Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

#### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

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Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Document Page 6 of 55 Case number (if known) Debtor 1 Charles W. Moran Part 6: **Answer These Questions for Reporting Purposes** 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. ☐ No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses ■ No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 **200-999** How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500.001 - \$1 million 20. How much do you □ \$0 - \$50,000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your liabilities □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion \$50,001 - \$100,000 to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million Sign Below Part 7: For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Charles W. Moran Signature of Debtor 2 Charles W. Moran Signature of Debtor 1

Executed on

MM / DD / YYYY

Executed on May 25, 2018

MM / DD / YYYY

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Document Debtor 1 Charles W. Moran

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For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page.

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ David M. Siegel	Date	May 25, 2018
Signature of Attorney for Debtor		MM / DD / YYYY
D		
David M. Siegel		
Printed name		
David M. Siegel & Associates		
Firm name		
790 Chaddick Drive		
Wheeling, IL 60090		
Number, Street, City, State & ZIP Code		
Contact phone (847) 520-8100	Email address	
#06207611 IL		
Bar number & State		

Fill in this information to identify your case:

Debtor 1

Charles W. Moran
First Name
Middle Name
Last Name

Debtor 2
(Spouse if, filing)
First Name
Middle Name
Last Name

United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS

☐ Check if this is an amended filing

12/15

### Official Form 106Sum

Case number (if known)

### Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

you	original forms, you must fill out a new <i>Summary</i> and check the box at the top of this page.		·
Par	t 1: Summarize Your Assets		
		Your as	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	21,475.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	21,475.00
Par	t 2: Summarize Your Liabilities		
			abilities t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	14,634.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	38,317.00
	Your total liabilities	\$	52,951.00
Par	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	2,394.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	2,394.00
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other sch	nedules.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a	a personal,	family, or

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

page 1 of 2

the court with your other schedules.

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Case number (if known)

8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

O. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

Debtor 1 Charles W. Moran

From Bort 4 on Schodule E/E convethe following:	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	0.00

5/25/18 10:11AM

C	926 19-12191 D	Document		18 10.12.59 DE	5/25/18 10:11.
Fill in this info	ormation to identify your ca	Document ase and this filing:	Paue 10 01 55		
Debtor 1	Charles W. Moran	· ·			
Dobtor 1	First Name	Middle Name	Last Name		
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name		
United States E	Bankruptcy Court for the:	NORTHERN DISTRICT OF	ILLINOIS		
Case number	_				☐ Check if this is an
					amended filing
0": 15	1001/5				
	orm 106A/B	- m4			
	ile A/B: Prope				12/15
think it fits best.	Be as complete and accurate ore space is needed, attach a	as possible. If two married p	<ul> <li>If an asset fits in more than o eople are filing together, both a On the top of any additional pag</li> </ul>	re equally responsible for s	upplying correct
Part 1: Describ	pe Each Residence, Building,	Land, or Other Real Estate Yo	u Own or Have an Interest In		
1. Do you own o	r have any legal or equitable i	nterest in any residence, buil	ding, land, or similar property?		
■ No. Go to P	Part 2.				
☐ Yes. Where	e is the property?				
Part 2: Describ	oe Your Vehicles				
Tart 2. Describ	De l'our vernoies				
□ No ■ Yes					
3.1 Make:	Toyota	Who has an interest	in the property? Check one		claims or exemptions. Put ed claims on Schedule D:
Model:	Rav4	■ Debtor 1 only			nims Secured by Property.
Year:	2015 nate mileage:	Debtor 2 only	0 1	Current value of the	Current value of the portion you own?
Other info		Debtor 1 and Debt		entire property?	portion you own?
	Motor Credit Corp d Lien \$14,634.00	☐ Check if this is co		\$14,050.00	\$14,050.00
		(see instructions)			
			vehicles, other vehicles, and s, snowmobiles, motorcycle a		
			es from Part 2, including an		\$14,050.00
	pe Your Personal and Househ				
Do you own o	r have any legal or equital	ole interest in any of the fo	llowing items?		Current value of the portion you own?

Do not deduct secured claims or exemptions.

6. **Household goods and furnishings** *Examples:* Major appliances, furniture, linens, china, kitchenware

□ No

Schedule A/B: Property Official Form 106A/B

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Case number (if known) 5/25/18 10:11AM Document Debtor 1 Charles W. Moran Yes. Describe..... \$750.00 **Household Goods & Furniture** 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games □ No Yes. Describe..... \$650.00 TV & Electronics 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ■ No ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No Yes. Describe..... **Normal Clothes** \$400.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver ☐ Yes. Describe..... 13. Non-farm animals Examples: Dogs, cats, birds, horses □ No Yes. Describe..... Dog \$25.00

14. Any other personal and household items you did not already list, including any health aids you did not list

No

☐ Yes. Give specific information.....

15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here ......

\$1,825.00

Part 4: Describe Your Financial Assets

Do you own or have any legal or equitable interest in any of the following?

Current value of the portion you own?

Do not deduct secured

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Case number (if known)

claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ☐ Yes..... 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ☐ No Institution name: Yes..... \$800.00 Checking/Savings **US Bank** 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts No ☐ Yes..... Institution or issuer name: 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ■ No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans □ No Yes. List each account separately. Type of account: Institution name: 401(k) **ERISA Qualified** \$4,000.00 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others □ No Institution name or individual: Yes. ..... Rental deposit \$800.00 **Security Deposit** 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No ☐ Yes. Give specific information about them...

Debtor 1

Charles W. Moran

5/25/18 10:11AM

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Case number (if known) Document Debtor 1 Charles W. Moran 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ☐ Yes. Give specific information about them... Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ■ No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ■ No ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance □ No Yes. Name the insurance company of each policy and list its value. Beneficiary: Company name: Surrender or refund value: **Term Life Insurance** \$0.00 **Death Benefit Only** 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. ■ No ☐ Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue

☐ Yes. Describe each claim.......

### 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims

■ No

☐ Yes. Describe each claim.......

#### 35. Any financial assets you did not already list

No

 $\square$  Yes. Give specific information..

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Case number (if known)

36.	Add the dollar value of all of your entries from Part 4, including for Part 4. Write that number here			\$5,600.00
Part	5: Describe Any Business-Related Property You Own or Have an Interes	est In. List any real esta	ate in Part 1.	
7. [	o you own or have any legal or equitable interest in any business-relate	d property?		
	No. Go to Part 6.			
	Yes. Go to line 38.			
Part	6: Describe Any Farm- and Commercial Fishing-Related Property You If you own or have an interest in farmland, list it in Part 1.	Own or Have an Interes	st In.	
6.	Oo you own or have any legal or equitable interest in any farm-	or commercial fishir	ng-related property?	
	■ No. Go to Part 7.			
	☐ Yes. Go to line 47.			
Part	7: Describe All Property You Own or Have an Interest in That You	Did Not List Above		
3.	Oo you have other property of any kind you did not already list?  Examples: Season tickets, country club membership	,		
	No			
	Yes. Give specific information			
_				
54.	Add the dollar value of all of your entries from Part 7. Write that	at number here		\$0.00
Part	8: List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$0.00
56.	Part 2: Total vehicles, line 5	\$14,050.00		
57.	Part 3: Total personal and household items, line 15	\$1,825.00		
58.	Part 4: Total financial assets, line 36	\$5,600.00		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54 +	\$0.00		
62.	Total personal property. Add lines 56 through 61	\$21,475.00	Copy personal property t	otal <b>\$21,475.00</b>
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$21,475.00

Debtor 1

Charles W. Moran

		Docume	nt Page 15 of 55	0,20,10 10.117
Fill in this infor	mation to identify your	case:		
Debtor 1	Charles W. Morar	1		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number (if known)				Check if this is an amended filing
				 3

## Official Form 106C

# Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1:	Identify	y the Pro	perty Yo	ou Claim	ı as Exempt	t
---------	----------	-----------	----------	----------	-------------	---

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
  - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
  - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Print description of the assessment and linear Comment value of the Assessment of th

Schedule A/B that lists this property	portion you own	Amount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Check only one box for each exemption.	
2015 Toyota Rav4 Toyota Motor Credit Corp	\$14,050.00	\$2,400.00	735 ILCS 5/12-1001(c)
Secured Lien \$14,634.00 Line from Schedule A/B: 3.1		100% of fair market value, up to any applicable statutory limit	
Household Goods & Furniture Line from Schedule A/B: 6.1	\$750.00	\$750.00	735 ILCS 5/12-1001(b)
Life from Schedule A/D. V.1		☐ 100% of fair market value, up to any applicable statutory limit	
TV & Electronics Line from Schedule A/B: 7.1	\$650.00	\$650.00	735 ILCS 5/12-1001(b)
Line non schedule AVB. 1.1		☐ 100% of fair market value, up to any applicable statutory limit	
Normal Clothes Line from Schedule A/B: 11.1	\$400.00	\$400.00	735 ILCS 5/12-1001(a)
Line non ochedale AVB. 1111		☐ 100% of fair market value, up to any applicable statutory limit	
Dog Line from Schedule A/B: 13.1	\$25.00	\$25.00	735 ILCS 5/12-1001(b)
LINE HOTH Scriedule A/D. 13.1		100% of fair market value, up to any applicable statutory limit	

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De	Charles vv. Moran			Case number (ii known)	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	Checking/Savings: US Bank Line from Schedule A/B: 17.1	\$800.00		\$800.00	735 ILCS 5/12-1001(b)
	Ellie Holli Goriodale 775.			100% of fair market value, up to any applicable statutory limit	
	401(k): ERISA Qualified Line from Schedule A/B: 21.1	\$4,000.00		\$4,000.00	735 ILCS 5/12-1006
	Line Holli Schedule A/B. 21.1			100% of fair market value, up to any applicable statutory limit	
	Rental deposit: Security Deposit Line from Schedule A/B: 22.1	\$800.00		\$800.00	735 ILCS 5/12-1001(b)
	Line Holli Schedule A/B. 22.1			100% of fair market value, up to any applicable statutory limit	
	Term Life Insurance Death Benefit Only	\$0.00		\$0.00	215 ILCS 5/238
	Line from Schedule A/B: 31.1			100% of fair market value, up to any applicable statutory limit	
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every No  ☐ Yes. Did you acquire the property cove ☐ No	3 years after that for ca	ases fi	,	,
	☐ Yes				

5/25/18 10:11AM Document Page 17 of 55 Fill in this information to identify your case: Debtor 1 Charles W. Moran Middle Name First Name Last Name Debtor 2 (Spouse if, filing) First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number (if known) ☐ Check if this is an amended filing Official Form 106D Schedule D: Creditors Who Have Claims Secured by Property 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known). 1. Do any creditors have claims secured by your property? ☐ No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Yes. Fill in all of the information below. Part 1: List All Secured Claims Column A Column B Column C 2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As Amount of claim Value of collateral Unsecured much as possible, list the claims in alphabetical order according to the creditor's name. Do not deduct the that supports this portion value of collateral. claim If any \$14,634.00 \$14,050.00 Toyota Motor Credit Corp Describe the property that secures the claim: \$584.00 Creditor's Name 2015 Toyota Rav4 Toyota Motor Credit Corp Secured Lien \$14,634.00 **Bankruptcy Department** As of the date you file, the claim is: Check all that PO Box 9013 apply Addison, TX 75001 ☐ Contingent Number, Street, City, State & Zip Code Unliquidated □ Disputed Who owes the debt? Check one. Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured) ■ Debtor 1 only car loan) Debtor 2 only Debtor 1 and Debtor 2 only ☐ Statutory lien (such as tax lien, mechanic's lien) ☐ At least one of the debtors and another Judgment lien from a lawsuit **Purchase Money Security** ☐ Check if this claim relates to a Other (including a right to offset) community debt Last 4 digits of account number 2974 Date debt was incurred 7/15 Add the dollar value of your entries in Column A on this page. Write that number here: \$14,634.00 If this is the last page of your form, add the dollar value totals from all pages. \$14,634.00 Write that number here: Part 2: List Others to Be Notified for a Debt That You Already Listed Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page. Name, Number, Street, City, State & Zip Code On which line in Part 1 did you enter the creditor? 2.1 Toyota Motor Credit Corp. HQ All mail goes to Last 4 digits of account number \_ 19001 S. Western Avenue

Official Form 106D

Torrance, CA 90509-2991

	Cas	e 18-15181	Doc 1	Filed 05/25/18 Document	Entere Page 18	ed 05/25/18 10:12:	59 Des	sc Main	5/25/18 10:11AN
Fill in	this informa	tion to identify you	ur case:	Duthien	Paue 1	0 (11.3);			
Debto	ır ı	Charles W. Mor	an Middle	Name	Last Name				
Debto	r 2								
(Spouse	e if, filing)	First Name	Middle	Name	Last Name				
United	d States Bank	ruptcy Court for the	: NORTHE	RN DISTRICT OF ILI	LINOIS				
Case	number								
(if know								heck if this	is an
							a	mended filir	ng
Offic	ial Form	106E/F							
-			Who Hav	e Unsecured	Claims			12	2/15
						Part 2 for creditors with NONF	PRIORITY clai	ms. List the	other party to
left. Att name a	ach the Contin	uation Page to this	page. If you have	e no information to rep		the Part you need, fill it out, n do not file that Part. On the to			
		have priority unsect							
	No. Go to Part		ireu cialilis aya	ilist your					
		. 2.							
Part 2	Yes.	of Your NONPRIOR	DITY Unequir	ad Claime					
		have nonpriority un							
						aduda a			
		nothing to report in thi	s part. Submit th	s form to the court with	your other sche	edules.			
	Yes.								
un tha	secured claim,	list the creditor separa	itely for each clai	m. For each claim listed	I, identify what t	b holds each claim. If a credito type of claim it is. Do not list claim three nonpriority unsecured claim	ims already inc	luded in Part	1. If more
								Total clain	n
						multi			
4.1		Radiologists S.	C	Last 4 digits of acc	ount number	accounts			\$150.00
	Nonpriority C <b>Dept. 410</b>	reditor's Name		When was the debt	incurred?				
	•	- eam, IL 60122-41	04					_	
	Number Stre	et City State Zlp Code		As of the date you	file, the claim i	is: Check all that apply			
	_	d the debt? Check or	ne.						
	Debtor 1	-		☐ Contingent					
	Debtor 2	-		☐ Unliquidated					
	Debtor 1	and Debtor 2 only		☐ Disputed					
	At least o	ne of the debtors and	another	Type of NONPRIOR	RITY unsecured	d claim:			
		this claim is for a co	mmunity	☐ Student loans					
	debt Is the claim	subject to offset?		□ Obligations arisir report as priority clai		ration agreement or divorce tha	at you did not		
	■ No	•				g plans, and other similar debts	3		
	☐ Yes			Other. Specify	Medical				
				. , _				_	

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4.2	CB/Eddie Bauer	Last 4 digits of account number	6390	\$63.00
	Nonpriority Creditor's Name PO Box 182789	When was the debt incurred?	4/13	
	Columbus, OH 43218-2789  Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	$\square$ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharin	ng plans, and other similar debts	
	☐ Yes	Other. Specify Purchases		
4.3	Chase Card	Last 4 digits of account number	4946	\$6,606.00
	Nonpriority Creditor's Name Attn: Correspondence Dept Po Box 15298	When was the debt incurred?	12/13	
	Wilmington, DE 19850  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Purchases		
4.4	Chung Brian MD	Last 4 digits of account number		\$99.00
	Nonpriority Creditor's Name 675 N St Clair St	When was the debt incurred?		
	Chicago, IL 60611  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	□ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	☐ Yes	Other. Specify Medical		

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Debtor	1 Charles W. Moran		Case number (if know)	
4.5	Citi	Last 4 digits of account number	0865	\$6,806.00
	Nonpriority Creditor's Name Attn: Bankruptcy Department PO Box 6241 Sioux Falls, SD 57717	When was the debt incurred?	8/7/14	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	I claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Purchases		
4.6	Citi	Last 4 digits of account number	2725	\$5,173.00
	Nonpriority Creditor's Name Attn: Bankruptcy Department PO Box 6241	When was the debt incurred?	7/16	
	Sioux Falls, SD 57717  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	I claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Purchases		
4.7	Discover Bank	Last 4 digits of account number	7188	\$2,805.00
	Nonpriority Creditor's Name PO Box 15316	When was the debt incurred?	4/18	
	Wilmington, DE 19850  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	□Yes	■ Other. Specify Purchases		

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Debtor	Charles W. Moran	Case number (if know)	
4.8	Dr. Frank J. Palella, MD  Nonpriority Creditor's Name	Last 4 digits of account number	\$37.00
	645 N Michigan Ave Chicago, IL 60611	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Medical	
4.9	Dr. Gregory S. Retzinger, MD  Nonpriority Creditor's Name	Last 4 digits of account number	\$205.00
	231 Albert Sabin Way Cincinnati, OH 45229	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	$\square$ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Medical	
4.1 0	Elmhurst Memorial Hospital  Nonpriority Creditor's Name	multi  Last 4 digits of account number accounts	\$23.00
	155 Brush Hill Rd. Elmhurst, IL 60126	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	□ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims  ☐ Debts to pension or profit-sharing plans, and other similar debts	
	■ No		
	Yes	Other. Specify Medical	

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4.1	Kelly O'Hara, MD	Look A digite of account number	\$148.00
1	Nonpriority Creditor's Name	Last 4 digits of account number	Ψ140.00
	251 E Huron St	When was the debt incurred?	
	Ste 16-738 Chicago, IL 60611		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Medical	
4.1			
2	Marie-France Poulin, MD,  Nonpriority Creditor's Name	Last 4 digits of account number	\$270.00
	1653 W Congress Pkwy	When was the debt incurred?	
	Chicago, IL 60612		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Medical	
4.1		multi	
3	Northwestern Medical	Last 4 digits of account number accounts	\$2,600.00
	Nonpriority Creditor's Name Professional Billing Dept	When was the debt incurred?	
	680 North Lake Shore Dr. Ste 100		
	Chicago, IL 60611	_	
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other Specify Medical	
		Carlott Opposity	

Debtor 1 Charles W. Moran

Document

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Panagiotis D Flevaris, MD, PhD	Last 4 digits of account number	\$0.00
Nonpriority Creditor's Name 675 N St Clair St	When was the debt incurred?	
Ste 19-100 Chicago, IL 60611		
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	$\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify NOTICE ONLY	
	multi	
Rush Oak Park Hospital	Last 4 digits of account number accounts	\$1,100.00
Nonpriority Creditor's Name	When was the debt incurred?	
520 S. Maple Ave Oak Park, IL 60304-1022	when was the debt incurred?	
Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	$\square$ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Medical	
Rush Presbyterian St. Luke's Med	multi	¢4 250 00
Ce Nonpriority Creditor's Name	Last 4 digits of account number accounts	\$1,350.00
1700 W. Van Buren St. Suite 161 TOB	When was the debt incurred?	
Chicago, IL 60612-3244	_	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	_	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	□ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:  ☐ Student loans	
Check if this claim is for a community debt		
debt Is the claim subject to offset?	$\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	■ Other. Specify Medical	

Document Page 24 of 55 Debtor 1 Charles W. Moran Case number (if know) multi 4.1 **Rush University Medical Center** \$252.00 Last 4 digits of account number accounts Nonpriority Creditor's Name **Rush Behavioral Systems** When was the debt incurred? 2001 Butterfield Rd., #220 **Downers Grove, IL 60515** Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Medical 4.1 \$2,402.00 9566 State Farm Bank Last 4 digits of account number 8 Nonpriority Creditor's Name PO Box 2313 When was the debt incurred? 3/16 Bloomington, IL 61702-2313 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim:  $\square$  At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes **Purchases** Other. Specify 4.1 SYNCB/Care Credit 4357 \$8,082.00 Last 4 digits of account number 9 Nonpriority Creditor's Name **Bankruptcy Department** When was the debt incurred? 3/17 PO Box 965061 Orlando, FL 32896-5061 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community

debt

■ No

☐ Yes

report as priority claims

Other. Specify

☐ Obligations arising out of a separation agreement or divorce that you did not

☐ Debts to pension or profit-sharing plans, and other similar debts

**Purchases** 

Is the claim subject to offset?

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4.2			
0	Thomas J. Lee, MD  Nonpriority Creditor's Name	Last 4 digits of account number	\$61.00
	259 E Erie St	When was the debt incurred?	
	16th Floor		
	Chicago, IL 60611  Number Street City State Zlp Code	As of the date you file the claim is Cheek all that apply	
	Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	_	Student loans	
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Medical	
4.2	University Pathology Diag. SC	Last 4 digits of account number 4708	\$35.00
1	Nonpriority Creditor's Name		Ψοσίου
	5700 Southwyck Blvd Toledo, OH 43614-1509	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify Medical	
4.2	US Bank		£0.00
2	Nonpriority Creditor's Name	Last 4 digits of account number	\$0.00
	425 Walnut St. Cincinnati, OH 45202	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other Specify NOTICE ONLY	

Document

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4.2	West Suburban Veterinary Associates	Last 4 digits of accoun	nt number	8025	\$50.00
	Nonpriority Creditor's Name 518 N Warwick Ave	When was the debt inc	curred?		
	Westmont, IL 60559-1551				=
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file,	the claim i	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY	unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans			
	debt	☐ Obligations arising or	ut of a sepa	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		•	
	No			g plans, and other similar debts	
	Yes	Other. Specify Me	dical		=
Part 3	List Others to Be Notified About a De	eht That You Already Liste	ed.		
5. Use t is try have	his page only if you have others to be notified ing to collect from you for a debt you owe to s more than one creditor for any of the debts the defor any debts in Parts 1 or 2, do not fill out	about your bankruptcy, for a omeone else, list the original at you listed in Parts 1 or 2, li or submit this page.	debt that y creditor in st the addi	Parts 1 or 2, then list the collection agenci tional creditors here. If you do not have ad	y here. Similarly, if you
	and Address	On which entry in Part 1 or Pa	,	8	
Citi PO B	ox 6500	Line 4.5 of (Check one):		Part 1: Creditors with Priority Unsecured Cla	
	c Falls, SD 57117-6500		-	Part 2: Creditors with Nonpriority Unsecured	Claims
		Last 4 digits of account number	er		
Name a	and Address	On which entry in Part 1 or Pa Line <b>4.6</b> of ( <i>Check one</i> ):	•	list the original creditor?  Part 1: Creditors with Priority Unsecured Cla	ims
_	ox 6500			Part 2: Creditors with Nonpriority Unsecured	
Sioux	c Falls, SD 57117-6500	Last 4 digits of account number		Tan _ Olounois man lonphoni, choose ou	o.a
	and Address	On which entry in Part 1 or Pa	· _		
	ank NA ox 769006	Line 4.5 of (Check one):		Part 1: Creditors with Priority Unsecured Cla	
	Antonio, TX 78245			Part 2: Creditors with Nonpriority Unsecured	Claims
	,	Last 4 digits of account number	er		
	and Address	On which entry in Part 1 or Pa			
	ox 769006	Line 4.0 of (Check one):		Part 1: Creditors with Priority Unsecured Cla	
	Antonio, TX 78245			Part 2: Creditors with Nonpriority Unsecured	Claims
		Last 4 digits of account number	er ————		
	and Address	On which entry in Part 1 or Pa		•	
	over Bank ox 15316	Line 4.7 of (Check one):		Part 1: Creditors with Priority Unsecured Cla	
_	ington, DE 19850			Part 2: Creditors with Nonpriority Unsecured	Claims
	<b>3</b> ,	Last 4 digits of account number	er		
Name a	and Address	On which entry in Part 1 or Pa	rt 2 did you	list the original creditor?	
	over Bank	Line 4.7 of (Check one):		Part 1: Creditors with Priority Unsecured Cla	ims
	over Products, Inc. ox 3025			Part 2: Creditors with Nonpriority Unsecured	Claims
	Albany, OH 43054				
	,,	Last 4 digits of account number	er		
Name a	and Address	On which entry in Part 1 or Pa	ırt 2 did vou	list the original creditor?	
US B		Line 4.22 of (Check one):	-	Part 1: Creditors with Priority Unsecured Cla	ims
	Bankruptcy Dept	·		Part 2: Creditors with Nonpriority Unsecured	
	ox 5229 nnati, OH 45201-5229			. ,	
GIIICI	iman, OII 43201-3223	Last 4 digits of account number	ər		

Debtor 1 Charles W. Moran

Debtor 1 Charles W. Moran

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Name and Address **US Bank** 1200 Energy Park Drive Saint Paul, MN 55108

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.22 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

■ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

#### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total				
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
	6f.	Student loans	6f.	\$ 0.00
Total claims				
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 38,317.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 38,317.00

		DOGUME	<u> </u>	
Fill in this infor	rmation to identify your	case:		
Debtor 1	Charles W. Morai	n		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				☐ Check if this is an amended filing

# Official Form 106G

# **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - □ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code	State what the contract or lease is for
<ul><li>2.1 Oak Park Residence Corp.</li><li>21 South Blvd.</li><li>Oak Park, IL 60302</li></ul>	Yealry 8/2018

	Case 10-13101 1	Docume		03/23/10 10.12.39 of 55	5/25/18 10:11AI
Fill in this	information to identify your				
Debtor 1	Charles W. Morar	1			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filin	g) First Name	Middle Name	Last Name		
United Stat	tes Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case numb (if known)	per				☐ Check if this is an amended filing
	Form 106H ule H: Your Cod	ebtors			12/15
people are ill it out, ar	are people or entities who a filing together, both are equ nd number the entries in the and case number (if known)	ally responsible for supp boxes on the left. Attach	lying correct informate the Additional Page to	ion. If more space is need	led, copy the Additional Page,
1. Do y	you have any codebtors? (If y	you are filing a joint case, o	lo not list either spouse	as a codebtor.	
■ No □ Yes					
	nin the last 8 years, have you a, California, Idaho, Louisiana,				ates and territories include
■ No	Go to line 3.			,	
	. Did your spouse, former spou	ise, or legal equivalent live	with you at the time?		
in line Form 1	2 again as a codebtor only i	f that person is a guarant	or or cosigner. Make	sure you have listed the c	ith you. List the person shown reditor on Schedule D (Official nedule E/F, or Schedule G to fill
	Column 1: Your codebtor Name, Number, Street, City, State and ZI	P Code		Column 2: The creditor Check all schedules the	or to whom you owe the debt nat apply:
3.1				☐ Schedule D, line	
1	Name			☐ Schedule E/F, line☐ Schedule G, line☐	
	Number Street City	State	ZIP Code	_	
3.2				☐ Schedule D, line	
	Name			☐ Schedule E/F, line☐ Schedule G, line☐	
-	Number Street			_	

State

City

ZIP Code

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	in this information to identif	y your case: les W. Moran					
Del	otor 2	iso III illorun					
		rt for the: NORTHERN DISTRI	ICT OF ILLINOIS				
Cas	se number		_				
O	fficial Form 106	I			MM / DD/ Y		
S	chedule I: You	r Income			IVIIVI / DD/ I		12/15
sup spo atta	plying correct information use. If you are separated		ling jointly, and your sp with you, do not include	ouse is living information	ng with you, incl n about your spo	ude information a ouse. If more space	bout your e is needed,
••	information.		Debtor 1			or non-filing spo	use
	If you have more than one attach a separate page w			· · ·		oyed	
	information about addition employers.	nal	☐ Not employed		⊔ Not e	mployed	
	Include part-time, season	Occupation al. or	Property Assistar	nce			
	self-employed work.	Employer's name	Oak Park Resider Corporation	nce			
Occupation may inclu or homemaker, if it ap				2			
Por	t 2: Give Details Ab	How long employed		hment for A	Additional Emplo	yment Informatio	1
Esti		of the date you file this form.	f you have nothing to rep	ort for any lii	ne, write \$0 in the	space. Include you	ır non-filing
	u or your non-filing spouse e space, attach a separate	have more than one employer, on sheet to this form.	combine the information f	or all emplo	yers for that perso	on on the lines belo	w. If you need
					For Debtor 1	For Debtor 2 or non-filing spou	
2.	, ,	es, salary, and commissions (Inonthly, calculate what the month	. ,	2. \$_	3,151.00	\$I	N/A
3.	Estimate and list month	ly overtime pay.		3. +\$_	0.00	+\$ <b>I</b>	N/A

3,151.00

N/A

Calculate gross Income. Add line 2 + line 3.

Deb	tor 1	Charles W. Moran	-	C	Case number (if I	(nown)				
					For Debtor 1			r Debtor n-filing s		
	Cop	by line 4 here	4.		\$ 3,15	1.00	\$		N/A	<u> </u>
5.	List	all payroll deductions:								
٠.	5a.	Tax, Medicare, and Social Security deductions	5a		\$ 78	8.00	\$		N/A	
	5b.	Mandatory contributions for retirement plans	5b		·	0.00	\$		N/A	_
	5c.	Voluntary contributions for retirement plans	50		·	0.00	\$		N/A	_
	5d.	Required repayments of retirement fund loans	5d	i.		0.00	\$		N/A	_
	5e.	Insurance	5e	€.	\$	0.00	\$		N/A	<u> </u>
	5f.	Domestic support obligations	5f.			0.00	\$_		N/A	_
	5g.	Union dues	5g			0.00	\$_		N/A	_
	5h.	Other deductions. Specify:	_ 5n	1.+	\$	0.00	+ \$_		N/A	_
6.		I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.			8.00	. \$_		N/A	_
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$2,36	3.00	. \$_		N/A	<u>.</u>
8.	List 8a.	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total								
		monthly net income.	8a		\$	0.00	\$_		N/A	<u>.</u>
	8b.	Interest and dividends	8b	).	\$	0.00	\$_		N/A	<u>.</u>
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	80	<b>).</b>	\$	0.00	\$		N/A	
	8d.	Unemployment compensation	8d	i.		0.00	\$		N/A	_
	8e.	Social Security	8e	€.	\$	0.00	\$		N/A	<u> </u>
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:	8f.			0.00	\$_		N/A	
	8g.	Pension or retirement income	89			0.00	·		N/A	_
	8h.	Other monthly income. Specify: Part time job (gross \$894 taxes \$)	_ 01	۱.+ ب	\$3	1.00	+ »_		N/A	<u>-</u>
9.	Add	l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	3	1.00	\$_		N/	A
10.	Cal	culate monthly income. Add line 7 + line 9.	10.	\$	2,394.00	+ \$		N/A	= \$	2,394.00
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		-	_,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	1 I '			* -	_,
11.	Star Incli othe Do	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your or friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not cify:	depe						_	0.00
12.		If the amount in the last column of line 10 to the amount in line 11. The reside that amount on the Summary of Schedules and Statistical Summary of Certainlies						e. 12.	\$	2,394.00
12	Do	you expect an increase or decrease within the year after you file this form	2						Combi month	ned ly income
13.	<b>5</b> 0	No.	•							
		Yes. Explain:								

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Debtor 1 Charles W. Moran Case number (if known)

# Official Form B 6I Attachment for Additional Employment Information

Debtor		
Occupation	Ramp	
Name of Employer	Fed X	
How long employed	18 years	
Address of Employer	O'hare Airport	
	Chicago, IL	

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Fill	in this information	to identify yo	our case:	·					
Deb	tor 1 Ch	arles W. N	loran			Ch	eck	if this is:	
Dah	tor O							n amended filing	in a manta attina abantan
	tor 2 ouse, if filing)								ving postpetition chapter the following date:
Unit	ed States Bankruptcy	Court for the	NORTH	ERN DISTRICT OF ILLIN	IOIS		М	M / DD / YYYY	
	e number nown)								
O1	fficial Form	106J							
So	chedule J:	Your	Exper	ses					12/15
Be info	as complete and	accurate as space is ne	possible.	If two married people a ch another sheet to this	re filing together, bot form. On the top of a	h are ed iny addi	quall	y responsible fo al pages, write y	r supplying correct
Par 1.	Describe 'Is this a joint ca	Your House	hold						
	■ No. Go to line								
	☐ Yes. <b>Does De</b>		n a separ	ate household?					
	□ No		•	al Form 106J-2, <i>Expense</i>	s for Separate Househ	old of De	ebtor	· 2.	
2.	Do you have de	pendents?	■ No						
	Do not list Debtor Debtor 2.	1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor 2			Dependent's age	Does dependent live with you?
	Do not state the								□ No
	dependents name	es.							☐ Yes
									□ No
									☐ Yes
									□ No
									☐ Yes
									□ No
3.	Do your expens expenses of peo yourself and you	ple other ti	han _	No Yes					☐ Yes
	<u> </u>								
Est exp	imate your expen	ses as of yo	our bankrı	y Expenses uptcy filing date unless y y is filed. If this is a sup	you are using this for plemental <i>Schedule</i> J	m as a : /, check	supp the	plement in a Cha box at the top of	pter 13 case to report f the form and fill in the
the				government assistance luded it on <i>Schedule I:</i>				Your expe	enses
4.	The rental or ho payments and an			ses for your residence. r lot.	Include first mortgage	4.	\$		860.00
	If not included in	n line 4:							
	4a. Real estate	e taxes				4a.			0.00
				's insurance		4b.			25.00
				pkeep expenses		4c.			0.00
	4d. Homeowne	ers associat	ion or cond	dominium dues		4d.	\$		0.00

0.00

Additional mortgage payments for your residence, such as home equity loans

Deb	tor 1	Charles \	W. Moran	Cas	se num	ber (if known)	
6.	Utilit	ies:					
0.	6a.		heat, natural gas		6a.	\$	75.00
	6b.	-	ver, garbage collection		6b.	· ·	0.00
	6c.		, cell phone, Internet, satellite, and cable s	ervices	6c.		200.00
	6d.	Other. Spe	• • • • • • • • • • • • • • • • • • • •	31 11000	6d.	·	0.00
7.			ekeeping supplies		7.	· -	250.00
7. 8.			hildren's education costs		8.	\$	0.00
9.			ry, and dry cleaning		9.	·	10.00
-			roducts and services		10.	· -	
		-	ntal expenses		11.	·	10.00
			•		11.	Φ	52.00
12.			Include gas, maintenance, bus or train fare ar payments.	•	12.	\$	363.00
13.			clubs, recreation, newspapers, magazin	es, and books	13.	·	0.00
14.			ributions and religious donations	,	14.	· -	0.00
		rance.	ibutions and rengious donations		17.	Ψ	0.00
10.			surance deducted from your pay or include	d in lines 4 or 20.			
		Life insura			15a.	\$	0.00
	15b.	Health insu	urance		15b.	\$	0.00
	15c.	Vehicle ins	surance		15c.	\$	157.00
	15d.	Other insu	rance. Specify:		15d.		0.00
16.			clude taxes deducted from your pay or incl	ided in lines 4 or 20.		·	0.00
	Spec		, ,		16.	\$	0.00
17.			ease payments:			_	
			ents for Vehicle 1		17a.		392.00
			ents for Vehicle 2		17b.	·	0.00
		Other. Spe	-		17c.	·	0.00
		Other. Spe	•		17d.	\$	0.00
18.			of alimony, maintenance, and support the		10	¢	0.00
40			your pay on line 5, Schedule I, Your Inco		18.	· ·	
19.			you make to support others who do no	t live with you.	40	\$	0.00
00	Spec		outre armana a matinal colored in linea. A an	at this form on on Cabadul	19.		
20.			erty expenses not included in lines 4 or a on other property	or this form or on Scheau	20a.		0.00
		Real estate			20a. 20b.		0.00
							0.00
			nomeowner's, or renter's insurance		20c. 20d.		0.00
			ce, repair, and upkeep expenses			·	0.00
			er's association or condominium dues		20e.	· ·	0.00
21.	Othe	er: Specify:			21.	+\$	0.00
22.	Calc	ulate your r	nonthly expenses				
		Add lines 4				\$	2,394.00
	22b.	Copy line 22	2 (monthly expenses for Debtor 2), if any, fi	om Official Form 106J-2		\$	,
	22c.	Add line 22a	a and 22b. The result is your monthly expe	nses.		\$	2,394.00
		7 taa 11110 EE	a dila 225. Tilo robali lo your monthly expo				2,334.00
23.		-	monthly net income.				
			12 (your combined monthly income) from S	chedule I.	23a.		2,394.00
	23b.	Copy your	monthly expenses from line 22c above.		23b.	-\$	2,394.00
	220	Cubtroot	our monthly over an ood from your monthly in				
	230.		our monthly expenses from your monthly in is your <i>monthly net income</i> .	come.	23c.	\$	0.00
24.	Do y	ou expect a	ın increase or decrease in your expense	s within the year after you fi	le this	s form?	
			u expect to finish paying for your car loan within terms of your mortgage?	he year or do you expect your mor	rtgage <sub>l</sub>	payment to increa	se or decrease because of a
	■ No	0.					
	□Y€	es.	Explain here:				

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Fill in this info	rmation to identify your	case:			
Debtor 1	Charles W. Morai	1			
	First Name	Middle Name	Last Name		
Debtor 2	First Name	Middle News	Last Name		
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States B	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number					
(if known)				☐ Check if this	
				amended fili	ing
Official For	m 106Dec				
-		n Individual	Debtor's Sch	andulas	
Deciara	HOH ADOUL &	<u> </u>	Depiol 2 3ci	<u>leuules</u>	12/15
If two married n	eonle are filing togethe	r hoth are equally respo	nsible for supplying corre	act information	
ii two married p	copic are ming togethe	i, both are equally respo	noible for supplying come	ot information.	
obtaining mone		n connection with a bank		Making a false statement, concealing pro fines up to \$250,000, or imprisonment fo	
Sig	gn Below				
Did you pa	ay or agree to pay some	one who is NOT an attor	ney to help you fill out ba	nkruptcy forms?	
■ No					
☐ Yes.	Name of person			Attach Bankruptcy Petition Prepare	er's Notice,
_	·			Declaration, and Signature (Official	
	alty of perjury, I declare re true and correct.	that I have read the sum	mary and schedules filed	with this declaration and	
X /s/ Ch	arles W. Moran		X		

Signature of Debtor 2

Date

Charles W. Moran

Signature of Debtor 1

Date May 25, 2018

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Fill in t	this inform	nation to identify you	r case:			
Debtor	1	Charles W. Mora				
Debtor	2	First Name	Middle Name	Last Name		
(Spouse i	if, filing)	First Name	Middle Name	Last Name		
United	States Bar	nkruptcy Court for the:	NORTHERN DISTRICT C	OF ILLINOIS		
Case n					_	Check if this is an mended filing
State Be as c	ement omplete a	nd accurate as possi	attach a separate sheet to t	re filing together, both are	ankruptcy equally responsible for sup additional pages, write you	
Part 1:	_	, , , , ,	rital Status and Where You	Lived Before		
1. Wł	nat is your	current marital statu	s?			
	Married					
	Not mari	ried				
2. Du	ring the la	ıst 3 years, have you	lived anywhere other than v	where you live now?		
_	No					
_		t all of the places you I	ived in the last 3 years. Do no	ot include where you live now	<i>'</i> .	
De	ebtor 1 Pri	or Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
	nd territorie No	es include Arizona, Ca		/ada, New Mexico, Puerto Ri	ity property state or territory co, Texas, Washington and W	
Part 2	Explair	n the Sources of You	r Income			
Fill	in the tota	I amount of income yo	nployment or from operating u received from all jobs and a have income that you receive	III businesses, including part-		ndar years?
		in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$14,000.00	☐ Wages, commissions, bonuses, tips	

☐ Operating a business

Operating a business

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				Debtor 1		Debtor 2		
				Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.		Gross income (before deductions and exclusions)
	r last calen anuary 1 to		31, 2017 )	■ Wages, commissions, bonuses, tips	\$60,771.00	☐ Wages, commissi bonuses, tips	ons,	
				☐ Operating a business		☐ Operating a busin	ess	
	r the calend anuary 1 to			■ Wages, commissions, bonuses, tips	\$51,184.00	☐ Wages, commissi bonuses, tips	ons,	
				☐ Operating a business		☐ Operating a busin	ess	
	and other winnings.  List each s	public bene If you are fil	fit payments; ing a joint cas the gross inco	er that income is taxable. Exa pensions; rental income; inter e and you have income that y me from each source separat	est; dividends; money collect ou received together, list it or	ed from lawsuits; royali nly once under Debtor	ties; and	
				Debtor 1		Debtor 2		
				Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.		Gross income (before deductions and exclusions)
Pa	rt 3: List	Certain Pa	vments You	Made Before You Filed for I	,			
6.	Are either ☐ No.	Neither Dindividual  During the  No.  Yes	ebtor 1 nor E primarily for a 90 days befo Go to line 7 List below e paid that cr not include	s debts primarily consumer bettor 2 has primarily consumer personal, family, or household re you filed for bankruptcy, die ach creditor to whom you paid beditor. Do not include payment payments to an attorney for the con 4/01/19 and every 3 years	mer debts. Consumer debts d purpose."  d you pay any creditor a total d a total of \$6,425* or more in ts for domestic support obligations bankruptcy case.	of \$6,425* or more?  none or more payment ations, such as child su	s and the	e total amount you
	Yes.			r both have primarily consu re you filed for bankruptcy, did		of \$600 or more?		
		■ No.	Go to line 7					
		☐ Yes	include pay	each creditor to whom you paid ments for domestic support of this bankruptcy case.				
	Creditor'	s Name an	d Address	Dates of navme	nt Total amount	Amount vou Wa	s this na	avment for

still owe

paid

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Debtor 1 Charles W. Moran

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Case number (if known)

7.	Within 1 year before you filed for bankrupto Insiders include your relatives; any general pa of which you are an officer, director, person in a business you operate as a sole proprietor. 1 alimony.	ontrol, or owner of 20% or	eral partners; partner more of their voting	erships of whic g securities; a	ch you are a gener nd any managing a	al partner; corporations agent, including one for
	<ul><li>No</li><li>Yes. List all payments to an insider.</li></ul>					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount yo		this payment
8.	Within 1 year before you filed for bankruptoinsider? Include payments on debts guaranteed or cos	<i></i>	ments or transfer a	iny property (	on account of a d	lebt that benefited an
	■ No					
	☐ Yes. List all payments to an insider					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount yo still ov		this payment ditor's name
Pai	rt 4: Identify Legal Actions, Repossession	ns, and Foreclosures				
9.	Within 1 year before you filed for bankrupto List all such matters, including personal injury modifications, and contract disputes.  ■ No □ Yes. Fill in the details.					
	Case title	Nature of the case	Court or agency		Status of the	ne case
	Case number		G ,			
10.	Within 1 year before you filed for bankruptor. Check all that apply and fill in the details below.  ■ No. Go to line 11.  □ Yes. Fill in the information below.	v.	rty repossessed, f			
	Creditor Name and Address	Describe the Property			Date	Value of the property
		Explain what happened				property
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment beca  ■ No  □ Yes. Fill in the details.		uding a bank or fir	nancial institu	ution, set off any	amounts from your
	Creditor Name and Address	Describe the action the	creditor took		Date action was aken	Amount
	Within 1 year before you filed for bankrupto court-appointed receiver, a custodian, or all No  Yes		rty in the possessi			efit of creditors, a
Pai	rt 5: List Certain Gifts and Contributions					
13.	Within 2 years before you filed for bankrup  ■ No □ Yes. Fill in the details for each gift.	tcy, did you give any gifts	s with a total value	of more than	ı \$600 per person	?
	Gifts with a total value of more than \$600 per person	Describe the gifts			Dates you gave he gifts	Value
	Person to Whom You Gave the Gift and Address:					

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Page 39 of 55 Case number (if known) Document Debtor 1 Charles W. Moran 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? Nο Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value contributed more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses 15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? No Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. Yes. Fill in the details. Person Who Was Paid Amount of Description and value of any property Date payment Address transferred or transfer was payment **Email or website address** made Person Who Made the Payment, if Not You David M. Siegel & Associates 5/2/18 \$450.00 **Attorney Fees** 790 Chaddick Drive Wheeling, IL 60090 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. Nο Yes. Fill in the details. **Person Who Was Paid** Description and value of any property Date payment Amount of Address transferred or transfer was payment made Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property

transferred in the ordinary course of your business or financial affairs?

Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.

No

Yes. Fill in the details.

**Person Who Received Transfer** Description and value of Describe any property or Date transfer was payments received or debts **Address** property transferred made paid in exchange Person's relationship to you

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19.	Within 10 years before you filed for bankrup beneficiary? (These are often called asset-pro  No  Yes. Fill in the details.		ny property to a	a self-settle	d trust or similar devic	e of which you	are a
	Name of trust	Description and v	alue of the pro	operty trans	sferred	Date Transf made	fer was
Par	List of Certain Financial Accounts, Inc	struments, Safe Deposi	t Boxes, and S	torage Uni	ts		
20.	Within 1 year before you filed for bankrupto sold, moved, or transferred? Include checking, savings, money market, on houses, pension funds, cooperatives, assortion of the second secon	or other financial accou	nts; certificate	s of deposi	-		
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of acco	ount or	Date account was closed, sold, moved, or transferred	before clo	balance sing or transfer
21.	Do you now have, or did you have within 1 cash, or other valuables?  No	year before you filed for	bankruptcy, a	ny safe de	posit box or other depo	ository for secu	rities,
	Yes. Fill in the details.  Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		Describe	the contents	Do you s have it?	till
22.	Have you stored property in a storage unit o  ■ No □ Yes. Fill in the details.	or place other than your	r home within 1	1 year befo	re you filed for bankrup	otcy?	
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or I to it? Address (Number, S State and ZIP Code)		Describe	the contents	Do you s have it?	till
Par	19: Identify Property You Hold or Control	for Someone Else					
23.	Do you hold or control any property that so for someone.  No Yes. Fill in the details.	meone else owns? Incl	ude any prope	rty you bor	rowed from, are storing	g for, or hold in	trust
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		Describe	the property		Value
Par	110: Give Details About Environmental Info	ormation					

For the purpose of Part 10, the following definitions apply:

- Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

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Debtor 1 Charles W. Moran

24.	Has any governmental unit notified you that yo	ou may be liable or potentially liab	ole und	der or in violation of an environme	ntal law?
	■ No □ Yes. Fill in the details.				
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State a ZIP Code)	and	Environmental law, if you know it	Date of notice
25.	Have you notified any governmental unit of an	y release of hazardous material?			
	■ No □ Yes. Fill in the details.				
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State a ZIP Code)	and	Environmental law, if you know it	Date of notice
26.	Have you been a party in any judicial or admin	istrative proceeding under any en	vironi	mental law? Include settlements a	nd orders.
	■ No □ Yes. Fill in the details.				
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Na	ture of the case	Status of the case
Par	t11: Give Details About Your Business or Co	nnections to Any Business			
27.	Within 4 years before you filed for bankruptcy	, did you own a business or have a	any of	f the following connections to any	business?
	☐ A sole proprietor or self-employed in a	trade, profession, or other activit	ty, eith	ner full-time or part-time	
	☐ A member of a limited liability compan	y (LLC) or limited liability partners	ship (L	LLP)	
	☐ A partner in a partnership				
	☐ An officer, director, or managing exec	utive of a corporation			
	☐ An owner of at least 5% of the voting of	or equity securities of a corporatio	n		
	■ No. None of the above applies. Go to Par	t 12.			
	☐ Yes. Check all that apply above and fill in	the details below for each busine	ess.		
	Business Name D Address	escribe the nature of the business	S	Employer Identification number Do not include Social Security n	umber or ITIN
		lame of accountant or bookkeeper	r		diffici of friit.
28.	Within 2 years before you filed for bankruptcy institutions, creditors, or other parties.	, did you give a financial statemen	nt to ai	Dates business existed nyone about your business? Inclu	de all financial
	■ No				
	Yes. Fill in the details below.				
	Name Address (Number, Street, City, State and ZIP Code)	ate Issued			

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Case number (if known) Document Debtor 1 Charles W. Moran

Part 12: Sign Below	
are true and correct. I unde	this <i>Statement of Financial Affairs</i> and any attachments, and I declare under penalty of perjury that the answers erstand that making a false statement, concealing property, or obtaining money or property by fraud in connection result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 9, and 3571.
/s/ Charles W. Moran	
Charles W. Moran	Signature of Debtor 2
Signature of Debtor 1	
Date May 25, 2018	Date
Did you attach additional p	ages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?
No	
☐Yes	
Did you pay or agree to pay	y someone who is not an attorney to help you fill out bankruptcy forms?
No	
7 Ves Name of Person	Attach the Rankruntcy Patition Preparer's Notice Declaration, and Signature (Official Form 119)

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Fill in this informa	ation to identify your	case:		
Debtor 1	Charles W. Morar	Niddle Name	Last Name	
Debtor 2	i list Name	Middle Name	Last Name	
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bank	kruptcy Court for the:	NORTHERN DIS	STRICT OF ILLINOIS	
Case number				
(if known)				Check if this is an amended filing
Official For	m 108			
Statement	t of Intentio	n for Indiv	viduals Filing Under Chapte	er 7
	idual filing under cha	-	II out this form if:	
_	claims secured by yo		not expired	
You must file this	er is earlier, unless th	ithin 30 days after	r you file your bankruptcy petition or by the date se ne time for cause. You must also send copies to th	
	ple are filing together date the form.	r in a joint case, bo	oth are equally responsible for supplying correct in	nformation. Both debtors must
			s needed, attach a separate sheet to this form. On	the top of any additional pages,
write you	ır name and case nur	nber (if known).		
Part 1: List You	ır Creditors Who Have	e Secured Claims		
information belo	ow.		D: Creditors Who Have Claims Secured by Property	(Official Form 106D), fill in the
Identify the cred				•
	litor and the property t	hat is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property
	litor and the property t	hat is collateral	What do you intend to do with the property that secures a debt?	
Creditor's <b>To</b>			secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's <b>To</b> y	litor and the property t		• • • • • • • • • • • • • • • • • • • •	Did you claim the property
name:	yota Motor Credit C		secures a debt?  □ Surrender the property.	Did you claim the property as exempt on Schedule C?
name:  Description of	yota Motor Credit C	Corp	□ Surrender the property. □ Retain the property and redeem it. ■ Retain the property and enter into a Reaffirmation Agreement.	Did you claim the property as exempt on Schedule C?
name:  Description of property	yota Motor Credit C	Corp Sit Corp	Secures a debt?  ☐ Surrender the property. ☐ Retain the property and redeem it. ☐ Retain the property and enter into a	Did you claim the property as exempt on Schedule C?
name:  Description of property securing debt:	yota Motor Credit C 2015 Toyota Rav4 Toyota Motor Cred Secured Lien \$14,0	Corp dit Corp 634.00	Surrender the property.  ☐ Retain the property and redeem it.  ☐ Retain the property and enter into a Reaffirmation Agreement.  ☐ Retain the property and [explain]:	Did you claim the property as exempt on Schedule C?
name:  Description of property securing debt:  Part 2: List You	yota Motor Credit C 2015 Toyota Rav4 Toyota Motor Cred Secured Lien \$14,0	Corp dit Corp 634.00	Surrender the property.  ☐ Retain the property and redeem it.  ☐ Retain the property and enter into a Reaffirmation Agreement.  ☐ Retain the property and [explain]:	Did you claim the property as exempt on Schedule C?  No Yes
name:  Description of property securing debt:  Part 2: List You For any unexpired in the information	yota Motor Credit C 2015 Toyota Rav4 Toyota Motor Cred Secured Lien \$14,0 Ir Unexpired Personal personal property le below. Do not list rea	Corp  dit Corp 634.00  I Property Leases ase that you listed al estate leases. Un	Surrender the property.  ☐ Retain the property and redeem it.  ☐ Retain the property and enter into a Reaffirmation Agreement.  ☐ Retain the property and [explain]:	Did you claim the property as exempt on Schedule C?  No Yes  ded Leases (Official Form 106G), fill be lease period has not yet ended.
name:  Description of property securing debt:  Part 2: List You For any unexpired in the information You may assume a	yota Motor Credit C 2015 Toyota Rav4 Toyota Motor Cred Secured Lien \$14,0 Ir Unexpired Personal personal property le below. Do not list rea	Corp  dit Corp 634.00  Property Leases ase that you listed al estate leases. Un	Surrender the property.  ☐ Retain the property and redeem it.  ☐ Retain the property and enter into a Reaffirmation Agreement. ☐ Retain the property and [explain]:  ☐ In Schedule G: Executory Contracts and Unexpire nexpired leases are leases that are still in effect; the	Did you claim the property as exempt on Schedule C?  No Yes  ded Leases (Official Form 106G), fill be lease period has not yet ended.
name:  Description of property securing debt:  Part 2: List You For any unexpired in the information You may assume a	yota Motor Credit C 2015 Toyota Rav4 Toyota Motor Cred Secured Lien \$14,0 Ir Unexpired Personal personal property le below. Do not list rea an unexpired personal expired personal pro	Corp  dit Corp 634.00  Property Leases ase that you listed al estate leases. Un property lease if	Surrender the property.  ☐ Retain the property and redeem it.  ☐ Retain the property and enter into a Reaffirmation Agreement. ☐ Retain the property and [explain]:  ☐ In Schedule G: Executory Contracts and Unexpire nexpired leases are leases that are still in effect; the	Did you claim the property as exempt on Schedule C?  No Yes  ded Leases (Official Form 106G), fill be lease period has not yet ended. 2).
name:  Description of property securing debt:  Part 2: List You For any unexpired in the information You may assume a	yota Motor Credit C 2015 Toyota Rav4 Toyota Motor Cred Secured Lien \$14,0 Ir Unexpired Personal personal property le below. Do not list rea an unexpired persona	Corp  dit Corp 634.00  Property Leases ase that you listed al estate leases. Un property lease if	Surrender the property.  ☐ Retain the property and redeem it.  ☐ Retain the property and enter into a Reaffirmation Agreement. ☐ Retain the property and [explain]:  ☐ In Schedule G: Executory Contracts and Unexpire nexpired leases are leases that are still in effect; the	Did you claim the property as exempt on Schedule C?  No Yes  ded Leases (Official Form 106G), fill the lease period has not yet ended. 2).  Will the lease be assumed?
name:  Description of property securing debt:  Part 2: List You For any unexpired in the information You may assume a	yota Motor Credit C 2015 Toyota Rav4 Toyota Motor Cred Secured Lien \$14,0 Ir Unexpired Personal personal property le below. Do not list rea an unexpired personal expired personal pro	Corp  dit Corp 634.00  Property Leases ase that you listed al estate leases. Un property lease if	Surrender the property.  ☐ Retain the property and redeem it.  ☐ Retain the property and enter into a Reaffirmation Agreement. ☐ Retain the property and [explain]:  ☐ In Schedule G: Executory Contracts and Unexpire nexpired leases are leases that are still in effect; the	Did you claim the property as exempt on Schedule C?  No Yes  ded Leases (Official Form 106G), fill the lease period has not yet ended. 2).  Will the lease be assumed?

Official Form 108

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Deb	otor 1 Charles W. Moran	Case number (if known)
Par	t 3: Sign Below	
	er penalty of perjury, I declare that I have inc perty that is subject to an unexpired lease.	licated my intention about any property of my estate that secures a debt and any personal
		licated my intention about any property of my estate that secures a debt and any personal
orop	perty that is subject to an unexpired lease.	X Signature of Debtor 2

Date

Date

May 25, 2018

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#### Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

#### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

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#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure</a>.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

### Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit</a> AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 18-15181 Doc 1 Filed 05/25/18 Entered 05/25/18 10:12:59 Desc Main Document Page 49 of 55

B2030 (Form 2030) (12/15)

#### United States Bankruptcy Court Northern District of Illinois

In re	e Charles W. Mor	an		Case No.	
			Debtor(s)	Chapter	7
	DISC	LOSURE OF COMP	PENSATION OF ATTOR	NEY FOR D	EBTOR(S)
1.	compensation paid to r	me within one year before the	016(b), I certify that I am the attornous filing of the petition in bankruptcy, on of or in connection with the bank	or agreed to be paid	to me, for services rendered or to
					1,350.00
	Prior to the filing	of this statement I have receiv	red	\$	450.00
	Balance Due			\$	900.00
2.	The source of the comp	pensation paid to me was:			
	Debtor	☐ Other (specify):			
3.	The source of compens	sation to be paid to me is:			
	Debtor	☐ Other (specify):			
4.	■ I have not agreed t	o share the above-disclosed co	ompensation with any other person u	unless they are mem	abers and associates of my law firm.
			ensation with a person or persons we names of the people sharing in the		
5.	In return for the above	-disclosed fee, I have agreed t	o render legal service for all aspects	of the bankruptcy	case, including:
	<ul> <li>b. Preparation and fili</li> <li>c. Representation of the</li> <li>d. [Other provisions a Negotiation agreements</li> </ul>	ing of any petition, schedules, he debtor at the meeting of cre as needed] as with secured creditors to	endering advice to the debtor in dete statement of affairs and plan which editors and confirmation hearing, an to reduce to market value; exe ded; preparation and filing of nods.	may be required; d any adjourned hea mption planning	arings thereof;
6.	Representa		I fee does not include the following dischargeability actions, judio eding.		es (except in Chapter 13
			CERTIFICATION		
this l	I certify that the foregonal bankruptcy proceeding.	oing is a complete statement of	f any agreement or arrangement for	payment to me for i	representation of the debtor(s) in
	May 25, 2018		/s/ David M. Siege	I	
	Date		David M. Siegel		
			Signature of Attorney  David M. Siegel &		
			790 Chaddick Driv	/e	
			Wheeling, IL 6009 (847) 520-8100	0	
1			(047) 320-0100		

Name of law firm

#### **Chapter 7 Bankruptcy Retainer Agreement**

This agreement acknowledges that the undersigned individual(s) [Client(s)] hereby retains and employs the Law Firm of DAVID M. SIEGEL & ASSOCIATES [Attorney] for representation in a Chapter 7 bankruptcy case. In consideration for services rendered and to be rendered, the Client agrees to pay Attorney as follows:

- a) A FLAT FEE as specified in paragraph H will be required to file a bankruptcy petition for the Client and for representation of the Client through discharge. The fee includes all required court costs and filing fees, as well as compensation for Attorney's time and labor. The fee is immediate compensation for the firm's commitment to perform future services; the fee is property of the firm and may be deposited in the firm's operating or business account.
- b) Representation shall begin upon execution of this agreement and tender of the initial payment, and will continue until the end of the case. The fee includes the preparation, review, and revision of the bankruptcy petition, communications with the Client, representation and appearance at the §341 Meeting of Creditors and §2004 examinations as necessary, communication with the bankruptcy and United States trustees, communication with creditors, review and completion of reaffirmation agreements, and court appearances.
- c) The fee does not include representation in any adversarial proceedings. The Client and Attorney may enter in to an additional agreement to provide for representation in an adversarial proceeding. In the event that the case is converted to another Chapter, there may be an additional fee.
- d) Additional Fees:
  - A fee of \$250.00 shall be added in the event that Client misses the scheduled §341 Meeting of Creditors.
  - A fee of \$100.00 shall be added to amend Schedules D, E, and F to include creditors who were
    not originally provided by the Client. The Client has the full responsibility to ensure that all
    creditors are listed.
  - A fee of \$25.00 shall be added for any non-sufficient/returned checks. Post-dated checks are not accepted and will be voided upon receipt.
  - A fee of \$820.00 shall be added to reopen a case and file the second credit counseling certificate if the Client fails to take the second credit counseling course and provide Attorney with the certificate in a timely fashion.
- e) The Client will be billed on any outstanding balance at the rate of \$100.00 every two weeks. Clients who fail to make payments as required will be assessed late fees in the amount of \$25.00 per billing period plus interest at the rate of 18% per year on any unpaid balance.
- f) No case shall be filed until all fees are paid in full.
- g) In the event that a Client pays the flat fee in full, and later elects to not proceed with the case, the Client is entitled to a refund of the court costs and filing fees only.

#### **Important Bankruptcy Information**

#### **Debts that are Discharged**

The Chapter 7 discharge order eliminates a Client's legal obligation to pay a debt that is discharged. Most, but not all, types of debts are discharged if the debt existed on the date the bankruptcy case was filed. (If this case was begun under a different Chapter of the Bankruptcy Code and converted to a Chapter 7, the discharge applies to debts owed when the bankruptcy case was converted.)

#### **Debts that are Not Discharged**

Some of the common types of debts which are not discharged in a Chapter 7 bankruptcy case are:

a) Debts for most taxes;

- b) Debts that are in the nature of alimony, maintenance, or support;
- c) Debts for student loans;
- d) Debts for most fines, penalties, forfeitures, or criminal restitution obligations;
- e) Debts for personal injuries or death caused by the Client's operation of a motor vehicle while intoxicated:
- f) Some debts that are not properly listed by the Client;
- g) Debts that the bankruptcy court specifically determines to be non-dischargeable;
- h) Debts for which the Client has given up the discharge protection by signing reaffirmation agreements in compliance with the Bankruptcy Code requirements for reaffirming debts.

Print: Charles Moran  Date:  Signed:	$\sim$ $\sim$	Signed: X	Date: 5-7-18
Date: Signed:	Moran		
		Signed:	Date:
Print:			

Attorney for David M. Siegel

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## **United States Bankruptcy Court**Northern District of Illinois

		- 10- 1		
In re	Charles W. Moran		Case No.	
		Debtor(s)	Chapter <b>7</b>	
	N/E	EDIEICATION OF CDEDITOD N	A A TIDIV	
	VERIFICATION OF CREDITOR MATRIX			
		Number of Creditors: 29		
	The above-named Debtor(s) hereby verifies that the list of creditors is true and correct to the best of my (our) knowledge.			
Date:	May 25, 2018	/s/ Charles W. Moran Charles W. Moran Signature of Debtor		

Affiliated Radiologists S.C. Dept. 4104 Carol Stream, IL 60122-4104

CB/Eddie Bauer PO Box 182789 Columbus, OH 43218-2789

Chase Card Attn: Correspondence Dept Po Box 15298 Wilmington, DE 19850

Chung Brian MD 675 N St Clair St Chicago, IL 60611

Citi Attn: Bankruptcy Department PO Box 6241 Sioux Falls, SD 57717

Citi PO Box 6500 Sioux Falls, SD 57117-6500

Citibank NA PO Box 769006 San Antonio, TX 78245

Discover Bank PO Box 15316 Wilmington, DE 19850

Discover Bank Discover Products, Inc. PO Box 3025 New Albany, OH 43054

Dr. Frank J. Palella, MD 645 N Michigan Ave Chicago, IL 60611

Dr. Gregory S. Retzinger, MD 231 Albert Sabin Way Cincinnati, OH 45229

Elmhurst Memorial Hospital 155 Brush Hill Rd. Elmhurst, IL 60126

Kelly O'Hara, MD 251 E Huron St Ste 16-738 Chicago, IL 60611

Marie-France Poulin, MD, 1653 W Congress Pkwy Chicago, IL 60612

Northwestern Medical Professional Billing Dept 680 North Lake Shore Dr. Ste 100 Chicago, IL 60611

Panagiotis D Flevaris, MD, PhD 675 N St Clair St Ste 19-100 Chicago, IL 60611

Rush Oak Park Hospital 520 S. Maple Ave Oak Park, IL 60304-1022

Rush Presbyterian St. Luke's Med Ce 1700 W. Van Buren St. Suite 161 TOB Chicago, IL 60612-3244

Rush University Medical Center Rush Behavioral Systems 2001 Butterfield Rd., #220 Downers Grove, IL 60515

State Farm Bank PO Box 2313 Bloomington, IL 61702-2313 SYNCB/Care Credit Bankruptcy Department PO Box 965061 Orlando, FL 32896-5061

Thomas J. Lee, MD 259 E Erie St 16th Floor Chicago, IL 60611

Toyota Motor Credit Corp Bankruptcy Department PO Box 9013 Addison, TX 75001

Toyota Motor Credit Corp. HQ All mail goes to 19001 S. Western Avenue Torrance, CA 90509-2991

University Pathology Diag. SC 5700 Southwyck Blvd Toledo, OH 43614-1509

US Bank 425 Walnut St. Cincinnati, OH 45202

US Bank Attn: Bankruptcy Dept PO Box 5229 Cincinnati, OH 45201-5229

US Bank 1200 Energy Park Drive Saint Paul, MN 55108

West Suburban Veterinary Associates 518 N Warwick Ave Westmont, IL 60559-1551